	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger	· · · · · · · · · · · · · · · · · · ·	
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	•	
9.	Fire		
10.	Extended Coverage	\$233,452	- 17%
11.	Inland Marine	\$233,432	1770
12. 13.	Homeowners Commercial Multi-Peril		
13. 14.	Crop Hail		
14.	Other		
13.	Line of Insurance		
Does fil N/A		territories) or certain classes? If so, specify:	
Brief de		vs rates of an advisory organization, specify of	organization):

** Change in Company's premium level which will result from application of new rates.



Balboa Insurance Company
Name of Company

Al Olanday - Compliance Specialist
Official - Title

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Change in Company's	premium	or rate	level	produced	bу	rate
Revision effective				·	-	

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger Commercial		
3. 4.	Liability Other Than Auto Burglary and Theft		
5. 6.	Glass Fidelity		
7. 8. 9.	Surety Boiler and Machinery Fire		
10. 11. 12.	Extended Coverage	0	-17.5%
13. 14. 15.	Crop Hail		
10.	Line of Insurance		
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or ce	rtain
org	ef description of filing. (If filing anization, specify organization) ase see cover letter and Expla	:	DIVISION OF THE
			STATE OF ILLINOIS/IDFPR
** C	djusted to reflect all prior rate changes. hanges in Company's premium level which vesult from application of new rates.	will	JUN 1 4 2005
		L	SPRINGFIELD, ILLINOIS
	The Charter Oak Fin	re Insurance Company Name of Company	
	. Sein	m Si	rector

Official - Title

	ange in Company's premium or ra	te level produced by rate	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5. 6.	Glass Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	5		
11.	Inland Marine DWMAX	1,886,735	
12.	ul e	<u></u>	
	Commercial Multi-Peril		
	Crop Hail Other		
15.	Line of Insurance		
	es filing only apply to certain te sses? If so, specify:	erritory (territories) or ce	rtain
org	ef description of filing. (If filing anization) anization, specify organization) ase see cover letter and Expl):	
			DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR
			RECEIVED
** C	ljusted to reflect all prior rate changes. hanges in Company's premium level which sult from application of new rates.	will	JUN 1 4 2005
	••		SPRINGFIELD, ILLINOIS
	The Phoenix Insu		
		Name of Company	

Director

(Change in Company's premium or rate	level produced by rate revision effective	7/1/05
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	·	
•	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	<u> </u>	
2	Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft		
5. 6.	Glass		
o. 7.	Fidelity		
7. 8.	Surety Boiler and Machinery		
9.	Fire	_	
10.	Extended Coverage		
11.	Inland Marine	\$4,808	-16.2% (See Exhibits 1 & 2)
12.	Homeowners	\$4,000	-10.2 % (See Exhibits 1 & 2)
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
15.	Line of Insurance		
	2 0		
Does f	iling only apply to certain territory (terr	ritories) or certain classes? If so, specify:	
Class	es applicable to Fire Suppression Sy	stems and Contractors.	
Brief c	lescription of filing. (If filing follows r	rates of an advisory organization, specify of	
		& rule filing for Sprinkler Pro Fire Su	PPRESSION CONTRACTOR INSURANCE IVISION OF INSURANCE STATE OF ILLINGISHDEPR STATE OF ILLINGISHDEPR 2005
Progr	am.		IVISION OF THE MOISTOFPH
* A	ljusted to reflect all prior rate changes.	1 5	STATECEIVE
	nange in Company's premium level whi	ich will	~ ~ 2005
	sult from application of new rates.	\	JUN 2.7 2005
		1	-10
		/	TELD, ILLINOIS
			SPRINGFIELD, ILLINOIS
		QBE Insurance Con	Poration
		Name of Comp	bany
		Dennean Robinson - Product Compli	iance/Development Analyst
		Official - Tit	

Change in Company's	premium	or rate	level	produced	bу	rate
Revision effective	07-24-05					

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		·
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7. 8.	Surety Boiler and Machinery		
9.	Fire		
10. 11.	Extended Coverage Inland Marine OMMIN	191,386	-17.5%
12.	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail Other		-
10.	Line of Insurance		
clas	es filing only apply to certain te sses? If so, specify: ef description of filing. (If filing anization, specify organization	follows rates of an adv	
	ase see cover letter and Expl		
	djusted to reflect all prior rate changes.		DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED
	hanges in Company's premium level which isult from application of new rates.	WIII	JUN 1 4 2005
	The Travelers In	demnity Company	SPRINGFIELD, ILLINOIS
		Name of Company	

Director

Change in Company's	s premium	or rate	level	produced	bу	rate
	07-24-05					

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent hange (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7.	Surety		
8. 9.	Boiler and Machinery Fire		
9. 10.	Extended Coverage		·· ······
11.	Inland Marine Personal	45,970	-17.5%
12.	Homeowners		
13. 14.	Commercial Multi-Peril Crop Hail		
	Other	.,	
	Line of Insurance		· · · · · · · · · · · · · · · · · · ·
	es filing only apply to certain te sses? If so, specify:	erritory (territories) or certai	n
org	ef description of filing. (If filing anization, specify organization) ase see cover letter and Expl):	,
** Cl	ljusted to reflect all prior rate changes. nanges in Company's premium level which sult from application of new rates.	will	DIVISION OF INSURA STATE OF ILLINOIS/IDF RECEIVE

Sen M. Sandy

The Travelers Indemnity Company of America

Director

SPRINGFIELD, ILLINOIS

Official - Title

Name of Company

Change in Company's premium or rat Revision effective 07-24-05	e level produced by rate		
(1)	(2) Annual Premium	(3) Percent	
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial			
 Automobile Physical Damage Private Passenger Commercial 			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass		<u> </u>	
6. Fidelity			
7. Surety	PART AND A STATE OF THE STATE O		
8. Boiler and Machinery		_	
9. Fire			
10. Extended Coverage			
11. Inland Marine Pelawal	15,618	17.5%	
12. Homeowners			
13. Commercial Multi-Peril		-	
14. Crop Hail			
15. Other Line of Insurance		<u> </u>	

classes? If	so, specify:			

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Please see cover letter and Explanatory Memorandum.

* Adjusted to reflect all prior rate changes.

** Changes in Company's premium level which will result from application of new rates.

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JUN 1 4 2005

SPRINGFIELD, ILLINOIS

Travelers Property Casualty Company of America

Name of Company

Director
Official - Title